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**MULTIPLE DEPENDENT CLAIM  
FEE CALCULATION SHEET**  
Substitute for Form PTO-1360  
(For use with Form PTO/SB/06)

Application Number

11/800 546

Filing Date

5/7/07

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
1	1					
2						
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14	1					
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Total Indep	4					
Total Depend	18					
Total Claims	22					

	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT	
	Indep	Depend	Indep	Depend	Indep	Depend
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Total Indep						
Total Depend						
Total Claims						

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5/21/02